

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET				Application Number 09/706,128		Filing Date 03 November, 2000		<input type="checkbox"/> To be Mailed					
Substitute for Form PTO-1360 (For use with Form PTO/SB/06)				Applicant(s) XIE ET AL.				Page 1 of 1					
* May be used for additional claims or amendments													
CLAIMS	AS FILED		AFTER FIRST AMENDMENT 10/26/2007		AFTER SEC. AMENDMENT		*			*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
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2			-	-			52						
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5			-	-			55						
6			-	-			56						
7			-	-			57						
8			-	-			58						
9			-	-			59						
10			-	-			60						
11			-	-			61						
12			-	-			62						
13			-	-			63						
14			-	-			64						
15			-	-			65						
16			1				66						
17				1			67						
18			-	-			68						
19				2			69						
20			1				70						
21				1			71						
22				1			72						
23			-	-			73						
24			-	-			74						
25			1				75						
26				1			76						
27			1				77						
28			-	-			78						
29			1				79						
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48							98						
49							99						
50							100						
Total Indep			5				Total Indep						
Total Depend				6			Total Depend						
Total Claims			11				Total Claims						

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